FORM D

UNITED STATESEC Mail Processing SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D MAY 28 2008

FORM D MAY 28 2008

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION DO

SECTION 4(6), AND/OR 110

UNIFORM LIMITED OFFERING EXEMPTION

OMB AI	PPROVAL
Expires: Estimated averag	
SEC U	SE ONLY
Prefix	Serial
1	ŀ
DATE R	ECEIVED
1	1

Name of Offering	(☐ check if this is an ame	endment and name	has changed, and ir	idicate change.)					
Limited partnership	interests of GovPlus Fun	d, L.P.							
Filing Under (Check I	box(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	☐ Section	4(6)	JLOE		
Type of Filing:	☐ New Filing					22000	SSED		
	Ited partnership interests of GovPlus Fund, L.P.								
Enter the inform	Inited partnership interests of GovPlus Fund, L.P. Inig Under (Check box(es) that apply):								
Name of Issuer	check if this is an ame	ndment and name h	nas changed, and in	dicate change.			DELITERS		
GovPlus Fund, L.P.	(formerly know as Norcor	n Capital GovPlus	Fund, L.P.)		1	HONSO	A KEOILING		
Address of Executive	Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)								
c/o NorCap Manage	ment, L.P., Two Lincoln C	enter, 5420 LBJ Fr	eeway, Suite 525, I	Dallas TX 75240	(972) 7	701-8815			
Address of Principal	Offices		(Number and Stree	et, City, State, Zip Co	de) Teleph	one Number	(Including Area Code)		
(if different from Exec	cutive Offices)								
Brief Description of B	Business: Private Inves	stment Company							
	<u> </u>				_				
_	`		•		∐ other (բ	30	047857		
	business trust		partnership, to be for	med			· · · · · · · · · · · · · · · · · · ·		
Associate Casternas de	>-441					57 Annual	C Estimated		
		-	·		4	IXI Actual	☐ Estimated		
Jurisaiction of Incorp	oration or Organization: (Er				:_4:\				
		Ci	N for Canada; FN fo	r otner toreign jurisa	iction)	ט נ	<u>. </u>		

GENERAL INSTRUCTIONS

Federa!

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC ID	ENTIFICATION DATA	\	
Each beneficial ownEach executive office	e issuer, if the issuer having the power and director of a	ier has been organized with er to vote or dispose, or dire			a class of equity securities of the issuer; tnership issuers; and
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, it	findividual):	NorCap Management	, L.P.		
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code	e): Two Lincoln Cente	r, 5420 LBJ Free	way, Suite 525, Dallas TX 75240
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ Investment Manager
Full Name (Last name first, it	findividual):	Norcom, David R			
Business or Residence Addr Suite 525, Dallas TX 75240		Street, City, State, Zip Code	e): c/o NorCap Manag	ement, L.P., Two	Lincoln Center, 5420 LBJ Freeway,
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, it	findividual):	Baggett, Carl Y.	···		
Business or Residence Addr Suite 525, Dallas TX 75240		Street, City, State, Zip Code	e): c/o NorCap Manag	ement, L.P., Two	Lincoln Center, 5420 LBJ Freeway,
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, it	findividual):	Arkansas ENT			
Business or Residence Addr Suite 525, Dallas TX 75240		Street, City, State, Zip Code	e): c/o NorCap Manag	ement, L.P., Two	Lincoln Center, 5420 LBJ Freeway,
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual):				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code	e):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual):				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code	e):		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, ii	f individual):	·			
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code	e):		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, it	f individual):				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code	e):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer. If more than five (5) persons to be listed and associated persons of such a broker or dealer. If more than five (5) persons to be listed and associated persons of such a broker or dealer. If more than five (5) persons to be listed and associated between or dealer. You may set forth the information for hab broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check *All States* or check individual States)												
1.	Has the issu	er sold, or (does the is	suer inten								☐ Yes	⊠ No
2	What is the r	ninimum in	vestment t	hat will be					· ·			\$1	000 000*
	TTHE IS THE	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*COUNCIN C	nat wiii bo	accepted	nom any n							
3.	Does the off	ering permi	t joint own	ership of a	single uni	t?					•••••	☑ Yes	s □ No
4.	any commiss offering. If a and/or with a	sion or simi person to state or st	lar remune be listed is ates, list th	eration for a an associ ne name of	solicitation ated perso f the broke	of purcha on or agen r or dealer	sers in cor t of a broke r. If more t	nnection w er or deale han five (5	ith sales of r registere b) persons	f securities d with the to be liste	s in the SEC d are		
Full	Name (Last n	ame first, it	f individual)									
Bus	ness or Resid	lence Addr	ess (Numb	per and Str	eet, City, S	State, Zip	Code)						····
Nam	e of Associat	ed Broker	or Dealer										
Stat	es in Which P	erson Liste	d Has Soli	icited or In	tends to S	olicit Purcl	nasers						
Olai													☐ All States
	AL] [AK]	[AZ]	☐ [AR]	☐ [CA]	☐ [CO]		□ [DE]		[FL]	☐ [GA]	☐ [HI]	[ID]	
	L) 🔲 (IN)	[AI]	[KS]	[KY]	[LA]	☐ [ME]	☐ [MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
	MT) [NE]	□ [NV]	□ (NH)	□ [NJ]	□ (NM)	□ {NY}	☐ [NC]	□ [ND]	□ [OH]	□ [OK]	□ [OR]	[PA]	
	RI] 🔲 (SC)	☐ [SD]	[NT]	[XT]	[U1]	□ [VT]	□ [VA]	☐ [WA]	[M∧]	□ [WI]	□ [WY]	□ [PR]	
Full	Name (Last n	ame first, i	findividual)									
Busi	ness or Resid	lence Addr	ess (Numb	er and Str	eet, City, S	State, Zip	Code)						
Nam	e of Associat	ed Broker	or Dealer										
Stat													☐ All States
	AL) 🔲 [AK]	☐ [AZ]	□ [AR]	CA]	☐ [CO]	□ [CT]	□ [DE]	□ [DC]	[FL]	□ [GA]	[HI]	[ID]	_
	L) [IN]	□ (IA]	□ (KS)	□ [KY]	☐ (LA)	☐ (ME)	☐ [MD]	☐ [MA]	[MI]	[MN]		[MO]	
	MT] [NE]	[VN]	□ [NH]	[NJ]	[MM]	□ [NY]	[NC]	□ [ND]	□ [OH]	□ [OK]	□ (OR)	□ [PA]	
	RI] 🔲 (SC)	[SD]		□ (TX)	[עדט]	□ (VT)	□ [VA]	□ [WA]	□ [WV]	[wi]		□ [PR]	
Full	Name (Last n	ame first, i	f individual)									
Busi	ness or Resid	lence Addr	ess (Numb	per and Str	reet, City, S	State, Zip	Code)						
Nam	e of Associat	ed Broker	or Dealer										
Stat													☐ All States
	` _		_		s)[CO]					☐ [GA]	☐ [HI]	[ID]	☐ All States
 [☐ [IA]		☐ [KY]			☐ [MD]			_ ` -	☐ (MS)	_ ` `	
			☐ [NH]	_	□ [NM]								
					☐ [UT]			□ [WA]					

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A	ND U	SE OF PROCE	EDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	. <u>\$</u>		<u>\$</u>	
	Equity	. <u>s</u>		<u>\$</u>	
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests			\$	80,970,902
	Other (Specify))			- <u>-</u> -	-
	Total	\$	100,000,000	- <u>-</u>	80,970,902
	Answer also in Appendix, Column 3, if filing under ULOE	<u></u>			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		79		80,970,902
	Non-accredited Investors	٠	N/A	<u>\$</u>	N/A
	Total (for filings under Rule 504 only)	·	N/A	<u>\$</u>	N/A
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1.				
	Type of Offering		Types of Security		Dollar Amount Sold
			N/A	s	Solu N/A
	Rule 505	· —	N/A	- - s	
	Regulation A	· —			N/A
	Rule 504		N/A	_	N/A
	Total	·	N/A	<u> </u>	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		🗆	\$	
	Printing and Engraving Costs		🗆	\$	
	Legal Fees		🛛	\$	9,067
	Accounting Fees		🗆	\$	·
	Engineering Fees		🛮	\$	
	Sales Commissions (specify finders' fees separately)		🗆	<u>\$</u>	
	Other Expenses (identify)		П	s	· · · · · · · · · · · · · · · · · · ·

9,067

	C. OFFERING PRICE, NUMBER OF INVESTORS, EX	PENSES A	AND USE OF PRO	CEED	S
4	b. Enter the difference between the aggregate offering price given in response to Par Question 1 and total expenses furnished in response to Part C—Question 4.a. This differance is adjusted gross proceeds to the issuer.		<u>s</u>	99,990,933	
5	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposused for each of the purposes shown. If the amount for any purpose is not known, furnestimate and check the box to the left of the estimate. The total of the payments listed the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b	ish an must equal	Payments to Officers, Directors & Affiliates		Payments to Others
	Salaries and fees		\$	_ 🗆	\$
	Purchase of real estate		\$		\$
	Purchase, rental or leasing and installation of machinery and equipment		\$	_ 🗆	\$
	Construction or leasing of plant buildings and facilities		\$		\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another iss pursuant to a merger	suer	\$	_ 🗆	\$
	Repayment of indebtedness		\$	_ 🗆	\$
	Working capital		\$	⊠	\$ 99,990,933
	Other (specify):		\$	_ 🗆	\$
			\$	_ 🗆	\$
	Column Totals		\$		\$ 99,990,933
	Total payments Listed (column totals added)		⊠ <u>\$</u>	99,99	0,933
	D. FEDERAL SIGNAT	URE			
:01	is issuer has duly caused this notice to be signed by the undersigned duly authorized penstitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Conthe issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	erson. If this r mmission, up	notice is filed under Rule on written request of its	505, the	e following signature e information furnished
SS	suer (Print or Type) Signature	W	<u></u>	ntn	
30	ovPlus Fund, L.P	1/		Marr	27 2008

Title of Signer (Print or Type)

Authorized person of NorCap Advisors, LLC the general partner of NorCap Management, L.P. its general partner $\,$

ATTENTION

Name of Signer (Print or Type)

Carl Y. Baggett

1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?□ Yes ☑ No								
	See App	pendix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.								
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.								
	uer has read this notification and knows the content red person.	s to be true and has duly caused this notice to be signed	on its behalf by the undersigned duly						
•	Print or Ty s Fund, L.P.	Signature	Date May 27, 2008						
Name o	f Signer (Print or Type) Baggett	Title of Signer (Print or Type) Authorized person of NorCap Advisors, LLC the general partner of NorCap Management, L.P. its general partner							

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APF	ENDIX				
1		2	3		-	4		1 5	
•	Intend to sell to non-accredited investors in State		e offered in state		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)				
State	Lii		(Part C – Item 1) Limited Partnership Interests	Number of Accredited Investors	Accredited I		Amount	Yes	No
AL									
AK									
AZ									
AR							<u> </u>		
CA		х	\$100,000,000	2	\$835,000	0	\$0		х
СО		Х	\$100,000,000	1	\$500,000	0	\$0		х
СТ					····				
DE									
DC	<u>-</u>	<u></u>							<u></u>
FL		X	\$100,000,000	3	\$4,785,659	0	\$0		Х
GA									ļ <u></u> .
HI									
ID									
IL									
IN		<u> </u>						ļ <u> </u>	
IA									ļ
KS		X	\$100,000,000	16	\$8,271,454	0	\$0		X
KY		<u> </u>							
LA								!	
ME		<u> </u>							
MD		X	\$100,000,000	1	\$500,000	0	\$0		X
MA	_				-				
MI									
MN									ļ. <u> </u>
MS							· · · · · ·		
MO							-		
MT									
NE					 				
NV								<u>. </u>	
NH	· <u>-</u> -					_			
NJ									
NM									<u> </u>

				APF	PENDIX	·				
1	4	2	3	3 4						
	to non-ad	to sell coredited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)	Type of investor and Amount purchased in State (Part C – Item 2)					fication te ULOE attach ation of granted) - Item 1)	
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
NY		Х	\$100,000,000	2	\$2,438,505	0	\$0		х	
NC										
ND										
ОН										
ок										
OR										
PA										
Ri										
sc										
SD										
TN				•						
TX		Х	\$100,000,000	49	\$59,940,284	0	\$0		Х	
UT										
VT										
VA		Х	\$100,000,000	2	\$1,700,000	0	\$0		х	
WA		х	\$100,000,000	1	\$1,000,000	0	\$0		х	
wv										
WI										
WY										
FN	L	×	\$100,000,000	1	\$1,000,000	0	\$0		X	

